

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))</i>		Attorney Docket No. TCO1-101US1	
		First Inventor Robert Joseph Panek, Jr.	
		Title APPARATUS AND METHOD FOR UNWINDING A NEEDLE PORTION	
		Express Mail Label No. EV 203129069 US	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450
---	---

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 19] <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 13] 5. Oath or Declaration [Total Pages 4] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). c. <input type="checkbox"/> Unexecuted Declaration 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: <u>Copy of Assignment from Parent Application;</u>
---	--

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

<input type="checkbox"/> Continuation	<input checked="" type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No: <u>09 / 934,298</u>
Prior application information		Examiner <u>Shan Tinh Nhan Luong</u>	Group / Art Unit: <u>3728</u>

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Insert Customer Number 23122		OR <input type="checkbox"/> Correspondence address below	
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	Joshua L. Cohen	Registration No. (Attorney/Agent)	38,040
Signature	<i>Joshua L. Cohen</i>	Date	August 1, 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Application, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.

 03915 U.S. PTO
 10/632877
 09/01/03

FEE TRANSMITTAL for FY 2003 <i>Effective 01/01/2003. Patent fees are subject to annual revision.</i>		Complete if Known	
		Application Number	To Be Assigned
		Filing Date	Herewith
		First Named Inventor	Robert Joseph Panek, Jr.
		Examiner Name	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	
TOTAL AMOUNT OF PAYMENT (\$)		750	Attorney Docket No. TCO1-101US1

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																											
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES																																																											
<input checked="" type="checkbox"/> Deposit Account:																																																													
Deposit Account Number: 18-0350																																																													
Deposit Account Name: RatnerPrestia																																																													
The Commissioner is authorized to: (check all that apply)																																																													
<input type="checkbox"/> Charge fee(s) indicated below																																																													
<input checked="" type="checkbox"/> Credit any overpayments																																																													
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application																																																													
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																																													
FEE CALCULATION																																																													
1. BASIC FILING FEE																																																													
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1001</td><td>2001</td><td>750</td><td>375</td><td></td><td></td><td>Utility filing fee</td><td>750</td></tr><tr><td>1002</td><td>2002</td><td>330</td><td>165</td><td></td><td></td><td>Design filing fee</td><td></td></tr><tr><td>1003</td><td>2003</td><td>520</td><td>260</td><td></td><td></td><td>Plant filing fee</td><td></td></tr><tr><td>1004</td><td>2004</td><td>750</td><td>375</td><td></td><td></td><td>Reissue filing fee</td><td></td></tr><tr><td>1005</td><td>2005</td><td>160</td><td>80</td><td></td><td></td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="7">SUBTOTAL (1)</td><td>(\$ 750)</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	1001	2001	750	375			Utility filing fee	750	1002	2002	330	165			Design filing fee		1003	2003	520	260			Plant filing fee		1004	2004	750	375			Reissue filing fee		1005	2005	160	80			Provisional filing fee		SUBTOTAL (1)							(\$ 750)				
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid																																																						
1001	2001	750	375			Utility filing fee	750																																																						
1002	2002	330	165			Design filing fee																																																							
1003	2003	520	260			Plant filing fee																																																							
1004	2004	750	375			Reissue filing fee																																																							
1005	2005	160	80			Provisional filing fee																																																							
SUBTOTAL (1)							(\$ 750)																																																						
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																																													
Total Claims 8 -20** = 0 X Fee from below = 0																																																													
Independent Claims 2 -3** = 0 X Fee from below = 0																																																													
Multiple Dependent X Fee from below = 0																																																													
<table border="1"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1202</td><td>2202</td><td>18</td><td>9</td><td></td><td></td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201</td><td>2201</td><td>84</td><td>42</td><td></td><td></td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203</td><td>2203</td><td>280</td><td>140</td><td></td><td></td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204</td><td>2204</td><td>84</td><td>42</td><td></td><td></td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>1205</td><td>2205</td><td>18</td><td>9</td><td></td><td></td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="7">SUBTOTAL (2)</td><td>(\$ 0)</td></tr></tbody></table>		Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	1202	2202	18	9			Claims in excess of 20		1201	2201	84	42			Independent claims in excess of 3		1203	2203	280	140			Multiple dependent claim, if not paid		1204	2204	84	42			** Reissue independent claims over original patent		1205	2205	18	9			** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)							(\$ 0)				
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid																																																						
1202	2202	18	9			Claims in excess of 20																																																							
1201	2201	84	42			Independent claims in excess of 3																																																							
1203	2203	280	140			Multiple dependent claim, if not paid																																																							
1204	2204	84	42			** Reissue independent claims over original patent																																																							
1205	2205	18	9			** Reissue claims in excess of 20 and over original patent																																																							
SUBTOTAL (2)							(\$ 0)																																																						
**or number previously paid, if greater; For Reissues, see above																																																													
		Other fee (specify)																																																											
		*Reduced by Basic Filing Fee Paid																																																											
		SUBTOTAL (3) (\$ 0)																																																											

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Joshua L. Cohen	Registration No. Attorney/Agent	38,040	Telephone	610/407-0700
Signature	<i>Joshua L. Cohen</i>	Date	August 1, 2003		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): Robert Joseph Panek, Jr. et al.

Docket No.

TCO1-101US1

Serial No.

Filing Date

Examiner

Group Art Unit

To Be Assigned

Herewith

Invention: APPARATUS AND METHOD FOR UNWINDING A NEEDLE PORTION

I hereby certify that the following correspondence:

Utility Patent Application Transmittal Form (1 page); Fee Transmittal Form (1 page) (in duplicate); Copy of Parent Application No. 09/934,298 (19 pages); Drawings - Figs. 1-13 (13 pages); Copy of Declaration/Power of Attorney from parent application (4 pages); Information Disclosure Statement (2 pages); PTO Form 1449 (2 pages); Preliminary Amendment (5 pages); Copy of Assignment from parent application (4 pages); Certificate of Mailing by Express Mail (1 page); Postcard

(Identify type of correspondence)

Is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to:

Mail Stop Patent Application,
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450
on August 1, 2003

Kathleen Libby*(Typed or Printed Name of Person Mailing Correspondence)*
*(Signature of Person Mailing Correspondence)*EV 203129069 US*("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**